U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - /

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1 / 1 / 04 Through: 12 / 31 / 04
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name William J Almond	Name INTII Brotherhood of Boilerma Kers
	Labor Organization File Number 000 - 674
P.O. Box, Bldg., Room No., if any Suite 200	P.O. Box, Building and Room Number, if any Suite 570
Street 5280 Old Springville Road	Street 753 State Ave.
City PINSON	City KANSAS City
State Alabama ZIP Code + 4 35/26	State KANSAS ZIP Code + 4 66/6/
5. Position in labor organization. Director NATIONAL TRANSPORT DIVISION - ASST. to INTIL President	
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Hoyes Boiler Thechanical INC.	Mador, mgmt. + customer Tripartite Alliance disussion 5/meetings 90/f
Trade Name, if any: /Jayes Boiles	outing.
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street 2160 N. Ashland Ave,	
City Chicago	\$ 60.00
State <b>III.NOIS</b> ZIP Code + 4 <b>60614</b>	
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed William Moment	On 7-20-05 205/856-9080
	Date Telephone Number